

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

ADDRESS (number and street) ▼

7 HANOVER SQUARE

☐ Check if different than previously reported. (ACC)

NEW YORK

NY

10004

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00173393

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☒ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 01 2015

through

M M M / D D D / Y Y Y Y Y Y
06 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer WALTER SKINNER

Signature of Treasurer

WALTER SKINNER

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
03 03 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		173486.60
(b) Cash on Hand at Beginning of Reporting Period.....	142347.44	
(c) Total Receipts (from Line 19)	16973.76	35407.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	159321.20	208894.12
7. Total Disbursements (from Line 31)	31130.60	80703.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	128190.60	128190.60
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		0	1		2	0	1	5		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	5		

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

15186.04

26246.04

(ii) Unitemized

1787.72

9161.48

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

16973.76

35407.52

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

16973.76

35407.52

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

16973.76

35407.52

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

16973.76

35407.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31000.00	80500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	130.60	203.52
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	31130.60	80703.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31130.60	80703.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16973.76	35407.52
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16973.76	35407.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: F3XA
Transaction ID :

Correcting beginning of period balance. Amend 2015 July 15 Quarterly (Cuapuanos for Congress 5/12/2015, Carper for Senate 5/4/2015).

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Jonathan Renfrew

Mailing Address 101 Constitution Ave NW

City State Zip Code
 Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance

Occupation

Vice President, Federal Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 09 / 2015

Transaction ID : 7226782

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PETER Atwater

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : PR317111414357

Amount of Each Receipt this Period

180.00

☐ Memo Item

P/R Deduction (\$30.00 Weekly)

Full Name (Last, First, Middle Initial)

C. GINA Birchall

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : PR317111914357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

2830.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 36

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. MICHAEL F Byrne

Mailing Address 206 SCHINDLER DRIVE

City

FLORHAM PARK

State

NJ

Zip Code

07932

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR317112714357

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

Full Name (Last, First, Middle Initial)

B. VINCENT D'Addona

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR317113014357

Amount of Each Receipt this Period

600.00

☐ Memo Item

P/R Deduction (\$100.00 Weekly)

Full Name (Last, First, Middle Initial)

C. LARRY Dietz

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR317113114357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. SYLVAN G Feldstein

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR317113714357

Amount of Each Receipt this Period

450.00

☐ Memo Item

P/R Deduction (\$75.00 Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL Ferik

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR317113814357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. DOUG Greene

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

2nd Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR317114814357

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. LISA Powell

Mailing Address 3709 BARTON CREEK BLVD

City State Zip Code
 AUSTIN TX 78735

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

Vice President BRC for Advanced Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR317115114357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

B. STEWART M Johnson

Mailing Address 7 HANOVER SQ

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR317115414357

Amount of Each Receipt this Period

180.00

☐ Memo Item

P/R Deduction (\$30.00 Weekly)

Full Name (Last, First, Middle Initial)

C. Ellie Jurado-Nieves

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR317115714357

Amount of Each Receipt this Period

600.00

☐ Memo Item

P/R Deduction (\$100.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

930.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. MARK B Murphy

Mailing Address 4 BECKER FARM RD

City
ROSELAND

State Zip Code
NJ 07068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR317117114357

Amount of Each Receipt this Period

600.00

☐ Memo Item

P/R Deduction (\$100.00 Weekly)

Full Name (Last, First, Middle Initial)

B. RICHARD O'Donnell

Mailing Address 46 LONGFELLOW LANE

City
MAHWAH

State Zip Code
NJ 07430

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR317117314357

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

Full Name (Last, First, Middle Initial)

C. HELEN Rennie

Mailing Address 7 HANOVER SQUARE

City
NEW YORK

State Zip Code
NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

2nd Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR317118014357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 36
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. TRACY Rich

Mailing Address 7 HANOVER SQUARE

City	State	Zip Code
NEW YORK	NY	10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	5		

Transaction ID : PR317118114357

Amount of Each Receipt this Period

600.00

☐ Memo Item

P/R Deduction (\$100.00 Weekly)

Full Name (Last, First, Middle Initial)

B. Walter R Skinner

Mailing Address 7 Hanover Sq

City	State	Zip Code
New York	NY	10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	5		

Transaction ID : PR318494614357

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

Full Name (Last, First, Middle Initial)

C. ROBERT R Reale

Mailing Address 7 HANOVER SQUARE

City	State	Zip Code
NEW YORK	NY	10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	5		

Transaction ID : PR318847714357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER T Swanker

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

Vice President, Group Dental & Vision

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR318847914357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

B. ANDREW E Gordon

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR318848114357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. LINDA Hogan

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

Guardian Life Insurance Co

Occupation

Second Vice President - HR Business Pa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR318848214357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. MARGHERITA Dimanni

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR318848314357

Amount of Each Receipt this Period

600.00

☐ Memo Item

P/R Deduction (\$100.00 Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN Flannigan

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

Senior VP & Corporate Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR318848914357

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

Full Name (Last, First, Middle Initial)

C. SEAN Quinn

Mailing Address 700 SOUTH STREET

City

PITTSFIELD

State

MA

Zip Code

01201

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INS. CO

Occupation

Vice President & Counsel Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR318849514357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. OLEG Gurvits

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INS. CO

Occupation

Assistant Vice President, Application

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR318849714357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

B. JAMES Bryant

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

Corporate Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR323982514357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. DOUGLAS B Dubitsky

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

VICE PRESIDENT PRODUCT MANAGEMENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR323983114357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. DONG Ahn

Mailing Address 7 HANOVER SQUARE

City State Zip Code
NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

GROUP STRATEGY/BUSINESS PLANNING /I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2015

Transaction ID : PR323983614357

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN P Meehan

Mailing Address 7 HANOVER SQUARE

City State Zip Code
NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

DIRECTOR, ENTERPRISE APPLICATION DE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2015

Transaction ID : PR323984014357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. MARLA Roman

Mailing Address 7 HANOVER SQUARE

City State Zip Code
NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2015

Transaction ID : PR323984214357

Amount of Each Receipt this Period

120.00

☐ Memo Item

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

570.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 36

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. STUART J Shaw

Mailing Address 7 HANOVER SQUARE

City
NEW YORKState Zip Code
NY 10004FEC ID number of contributing
federal political committee.

C

Name of Employer
GUARDIAN LIFE INSURANCE COOccupation
GROUP PRODUCT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR331521514357

Amount of Each Receipt this Period

120.00

☐ Memo Item

P/R Deduction (\$20.00 Weekly)

Full Name (Last, First, Middle Initial)

B. STEPHANIE Susens

Mailing Address 7 HANOVER SQUARE

City
NEW YORKState Zip Code
NY 10004FEC ID number of contributing
federal political committee.

C

Name of Employer
GUARDIAN LIFE INSURANCE COOccupation
Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR331521814357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. JARED M Williams

Mailing Address 7 HANOVER SQUARE

City
NEW YORKState Zip Code
NY 10004FEC ID number of contributing
federal political committee.

C

Name of Employer
GUARDIAN LIFE INSURANCE COOccupation
Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR331521914357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

420.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. DOUGLAS SCOTT Dolfi

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR390702914357

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

Full Name (Last, First, Middle Initial)

B. THOMAS Rafferty

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

VP, AGENCY ADMINISTRATION & FINANCE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR390703114357

Amount of Each Receipt this Period

120.00

☐ Memo Item

P/R Deduction (\$20.00 Weekly)

Full Name (Last, First, Middle Initial)

C. MARK C Abbott

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR407636514357

Amount of Each Receipt this Period

240.00

☐ Memo Item

P/R Deduction (\$40.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

660.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. SHARRI Norman

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 GUARDIAN LIFE INSURANCE CO

Occupation
 DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR407636714357

Amount of Each Receipt this Period

120.00

☐ Memo Item

P/R Deduction (\$20.00 Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID Jacoby

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 NEW YORK NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 GUARDIAN LIFE INSURANCE CO

Occupation
 CFO & VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR407639114357

Amount of Each Receipt this Period

360.00

☐ Memo Item

P/R Deduction (\$75.00 Weekly)

Full Name (Last, First, Middle Initial)

C. EDUARDO Blanco

Mailing Address 7 HANOVER SQUARE

City State Zip Code
 New York NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 GUARDIAN LIFE INSURANCE CO

Occupation
 Vice President, Chief Audit Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2015

Transaction ID : PR407639614357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

630.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 36
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. DEBRA B Zoppy

Mailing Address 7 HANOVER SQUARE

City	State	Zip Code
New York	NY	10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR407640014357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

B. KEVIN Carey

Mailing Address 7 HANOVER SQUARE

City	State	Zip Code
NEW YORK	NY	10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR407641614357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. LAWRENCE Hazzard

Mailing Address 700 SOUTH STREET

City	State	Zip Code
PITTSFIELD	MA	01201

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR407646114357

Amount of Each Receipt this Period

120.00

☐ Memo Item

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

420.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. RICHARD Sikorski

Mailing Address 7 HANOVER SQUARE

City

NEW YORK

State

NY

Zip Code

01201

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

ASSISTANT VICE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR407647214357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

B. CARL Desrochers

Mailing Address 700 SOUTH STREET

City

PITTSFIELD

State

MA

Zip Code

01201

FEC ID number of contributing federal political committee.

C

Name of Employer

GUARDIAN LIFE INSURANCE CO

Occupation

2ND VICE PRESIDENT - ACTUARY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR407648214357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. RAYMOND Marra

Mailing Address 7 Hanover Sq

City

New York

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

Guardian Life Insurance

Occupation

Group Ins Products Mgmt

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR442534314357

Amount of Each Receipt this Period

240.00

☐ Memo Item

P/R Deduction (\$40.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

540.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 36

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. CARL Amick

Mailing Address 7 HANOVER SQ

City
NEW YORKState Zip Code
NY 10004FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN

Occupation

Vice President Pricing & Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR442534614357

Amount of Each Receipt this Period

210.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

B. Michael Edson

Mailing Address 7 Hanover Square

City
New YorkState Zip Code
NY 10004FEC ID number of contributing
federal political committee.

C

Name of Employer

GUARDIAN

Occupation

Director, Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR479909014357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. Gordon Bailey

Mailing Address 7 Hanover Square

City
New YorkState Zip Code
NY 10004FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian

Occupation

Vice President & CFO, Retirement Solut

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR479909114357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

510.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 36

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. PETER Feeley

Mailing Address 7 Hanover Square

City State Zip Code
 New York NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life

Occupation

VP, Corporate Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 30 / 2015

Transaction ID : PR479944414357

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$50.00 Weekly)

Full Name (Last, First, Middle Initial)

B. Nahulan Ethirveerasingam

Mailing Address 7 Hanover Square

City State Zip Code
 New York NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life

Occupation

Second Vice President, Product Managem

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2015

Transaction ID : PR480029214357

Amount of Each Receipt this Period

120.00

☐ Memo Item

P/R Deduction (\$20.00 Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY Sherman

Mailing Address 7 Hanover Square

City State Zip Code
 New York NY 10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life

Occupation

Vice President, Compensation, Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 30 / 2015

Transaction ID : PR480029414357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

570.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Simon Manning

Mailing Address 7 Hanover Square

City

New York

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

Guardian

Occupation

Director, Business Controls

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR515435914357

Amount of Each Receipt this Period

125.04

☐ Memo Item

P/R Deduction (\$20.84 Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL Kryza

Mailing Address 7 Hanover Square

City

New York

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

Guardian Life Insurance

Occupation

Vice President, Business Development,

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR557667914357

Amount of Each Receipt this Period

240.00

☐ Memo Item

P/R Deduction (\$40.00 Weekly)

Full Name (Last, First, Middle Initial)

C. John H Walter

Mailing Address 7 Hanover Square

City

New York

State

NY

Zip Code

10004

FEC ID number of contributing federal political committee.

C

Name of Employer

Guardian

Occupation

Vice President, Director of Finance, R

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR564218714357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

515.04

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Stephen J Prunier

Mailing Address 700 South St.

City

Pittsfield

State

MA

Zip Code

01201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian

Occupation

Second Vice President, Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR564219014357

Amount of Each Receipt this Period

141.00

☐ Memo Item

P/R Deduction (\$23.50 Weekly)

Full Name (Last, First, Middle Initial)

B. Terence Zastrow

Mailing Address 2300 East Capitol Dr.

City

Appleton

State

WI

Zip Code

54911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian

Occupation

Second Vice President, Group Maintenance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR564219114357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

C. Michael R Moreau

Mailing Address 7 Hanover Square

City

New York

State

NY

Zip Code

10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian

Occupation

Vice President, Human Resources Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : PR564219214357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

441.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Richard C Jones

Mailing Address 7 Hanover Square

City

New York

State

NY

Zip Code

10004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance

Occupation

Vice President, Government Relations

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : PR656727414357

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$25.00 Weekly)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
/ / /

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
/ / /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

15186.04

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City	State	Zip Code
Sacramento	CA	95841

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Mike Thompson

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2015

Transaction ID : 7226220

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Perlmutter For CongressMailing Address 3440 Youngfield Street
#264

City	State	Zip Code
Wheat Ridge	CO	80033

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Edwin Perlmutter

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : 7226222

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Montanans For Tester

Mailing Address PO Box 1135

City	State	Zip Code
Helena	MT	59624

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Jon Tester

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : 7226223

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Duffy For Congress

Mailing Address PO Box 538

City	State	Zip Code
Wausau	WI	54402

Purpose of Disbursement

Candidate Name

Rep. Sean P. Duffy

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: WI District: 07

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : 7226225

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of John Thune

Mailing Address PO Box 841

City	State	Zip Code
Sioux Falls	SD	57101

Purpose of Disbursement

Candidate Name

Sen. John R. Thune

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: SD District:

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Transaction ID : 7226226

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Erik PaulsenMailing Address P.O. Box 44369
250 Prairie Center Drive

City	State	Zip Code
Eden Prairie	MN	55344

Purpose of Disbursement

Candidate Name

Rep. Erik P. Paulsen

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MN District: 03

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2015

Transaction ID : 7226228

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Mchenry For Congress

Mailing Address PO Box 2165

City	State	Zip Code
Gastonia	NC	28053

Purpose of Disbursement

011

Candidate Name

Rep. Patrick Timothy McHenry

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NC District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2015

Transaction ID : 7226230

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. People For Patty Murray

Mailing Address PO Box 3662

City	State	Zip Code
Seattle	WA	98124

Purpose of Disbursement

011

Candidate Name

Sen. Patty Murray

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

Transaction ID : 7226232

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Himes For Congress

Mailing Address 857 Post Road, #312

City	State	Zip Code
Fairfield	CT	06824

Purpose of Disbursement

011

Candidate Name

Rep. Jim A. Himes

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2015

Transaction ID : 7226235

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Capuano For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2015

Mailing Address PO Box 440305

City	State	Zip Code
Somerville	MA	02144

Transaction ID : 7226236

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Rep. Michael E. Capuano

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MA District: 07

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brady For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2015

Mailing Address PO Box 8277

City	State	Zip Code
The Woodlands	TX	77387

Transaction ID : 7226237

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Rep. Kevin Patrick Brady

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Carper For Senate

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Mailing Address PO Box 2882

City	State	Zip Code
Wilmington	DE	19805

Transaction ID : 7226238

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Sen. Thomas R. Carper

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: DE District:

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Bennet For Colorado

Mailing Address PO Box 3078

City	State	Zip Code
Denver	CO	80201

Purpose of Disbursement

Candidate Name

Sen. Michael F. Bennet

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CO District:

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : 7226239

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ryan For Congress, Inc.

Mailing Address PO Box 1488

City	State	Zip Code
Janesville	WI	53547

Purpose of Disbursement

Candidate Name

Paul Ryan

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: WI District: 01

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2015

Transaction ID : 7226240

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Sherrod Brown

Mailing Address PO Box 15293

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement

Candidate Name

Sen. Sherrod Brown

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: OH District:

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2015

Transaction ID : 7226241

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Portman For Senate Committee

Mailing Address 9856 Archer Lane

City	State	Zip Code
Dublin	OH	43017

Purpose of Disbursement

011

Candidate Name

Rob Portman

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2015

Transaction ID : 7226242

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Jeb Hensarling

Mailing Address PO Box 820504

City	State	Zip Code
Dallas	TX	75382

Purpose of Disbursement

011

Candidate Name

Rep. Jeb Hensarling

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2015

Transaction ID : 7226243

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hoyer For CongressMailing Address 700 13th Street Nw
Suite 600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement

011

Candidate Name

Rep. Steny H. Hoyer

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: MD

District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2015

Transaction ID : 7226245

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Kind For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2015

Mailing Address 205 5th Avenue S
Room 428

City La Crosse State WI Zip Code 54601

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Ron Kind

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Transaction ID : 7226246

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tim Scott For Senate

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2015

Mailing Address 1405 Ashley River Rd

City Charleston State SC Zip Code 29407

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Tim Scott

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District:

Transaction ID : 7226248

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Pat Toomey

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2015

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Pat Toomey

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Transaction ID : 7226249

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Shelby For U S Senate

Mailing Address PO Box 1091

City	State	Zip Code
Tuscaloosa	AL	35403

Purpose of Disbursement

011

Candidate Name

Sen. Richard C. Shelby

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2015

Transaction ID : 7226250

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Chris Murphy

Mailing Address PO Box 127

City	State	Zip Code
Cheshire	CT	06410

Purpose of Disbursement

011

Candidate Name

Sen. Chris Scott Murphy

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2015

Transaction ID : 7226252

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City	State	Zip Code
Springfield	MA	01108

Purpose of Disbursement

011

Candidate Name

Rep. Richard E. Neal

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2015

Transaction ID : 7226777

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. Hatch Election Committee Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2015

Mailing Address PO Box 3986

City	State	Zip Code
Washington	DC	20027

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Orrin Grant Hatch

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: UT District:

Transaction ID : 7226778

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

--

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

31000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE Federal PAC)

Full Name (Last, First, Middle Initial)

A. JPMorgan Chase

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2015

Mailing Address

City	State	Zip Code
	DC	

Transaction ID : 7226832

Purpose of Disbursement

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

68.26

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

☐ Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

--

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

☐ Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

--

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

☐ Memo Item

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

68.26

68.26
